

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|---------|
| FEE DETERMINATION | IN P. | | 6 21 01 |
| O.I.P.E. CLASSIFIER | | 1018 | 7-3-01 |
| FORMALITY REVIEW | FR | | 8-21-01 |
| RESPONSE FORMALITY REVIEW | | | |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 ÷ Restricted O Objected

| Claim | Date |
|----------|---------|
| Final | |
| Original | 8/16/04 |
| 1 | ✓ |
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| Claim | Date |
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| Claim | Date |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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JCS/11
08/21/01